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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/513 652

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>				<u>690.00</u>	=	<u>690.00</u>
Total Claims >20	<u>203/103</u>	<u>      </u> -20 =	<u>      </u> X			=	
Independent Claims >3	<u>202/102</u>	<u>  9  </u> -3 =	<u>  6  </u> X		<u>28.00</u>	=	<u>468.00</u>
Mult. Dep Claim Present	<u>204/104</u>					=	
Surcharge	<u>205/105</u>				<u>130.00</u>	=	<u>130.00</u>
English Translation	<u>139</u>					=	
							<u>1288.00</u>

### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 1288.00

Less Filing Fees Submitted - \$                     

BALANCE DUE = \$ 1288.00

D. Thomas  
Office of Initial Patent Examination

Figure 7

# **PATENT APPLICATION FEE DETERMINATION RECORD** Effective December 29, 1999

Application or Docket Number

09/513652

Edwards

## **CLAIMS AS FILED - PART I**

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	2019	minus 20 = *
INDEPENDENT CLAIMS	8	minus 3 = * 65
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## **CLAIMS AS AMENDED - PART II**

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 20	Minus	** 20	= 0
Independent	* 3	Minus	*** 8	= 22
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	418.00
+130=		OR	+260=	
TOTAL		OR	TOTAL	1158.00

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	